



## APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT PERMIT

Name of Establishment \_\_\_\_\_ Operator \_\_\_\_\_ Contact Telephone \_\_\_\_\_

Name of Event/Location \_\_\_\_\_ Date(s) of Event/Hours of Operation \_\_\_\_\_

Operator Mailing Address \_\_\_\_\_

1. Before completing this application, read Food Safety at Temporary Events and the temporary food service "Are You Ready?" Checklist. Have you read this material? \_\_\_\_\_ YES \_\_\_\_\_ NO

2. Menu: Attach or list all items. Any changes must be submitted and approved by the Board of Health at least 7 days prior to the event.

3. Will all foods be prepared at the temporary food service booth?  
 \_\_\_\_\_ YES Fill out **Section B** below.

\_\_\_\_\_ NO

1. Attach a copy of the food permit and agreement for use of another approved kitchen giving dates and times. 2. Fill out both **Sections A and B** below.

4. List each potentially hazardous food item, and for each item check which preparation procedure will occur.

**SECTION A: At the approved kitchen:**

FOOD	Thaw	Cut/ Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Package
1.								
2.								
3.								
4.								
5.								

**SECTION B: At the booth:**

FOOD	Thaw	Cut/ Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Package
1.								
2.								
3.								
4.								
5.								

Note: If your food preparation procedures cannot fit these charts, please list all of the steps in preparing each menu item on an attached sheet.

5. Food source(s): \_\_\_\_\_

Source and storage of water/ice: \_\_\_\_\_

Storage and disposal of wastewater: \_\_\_\_\_

Storage and disposal of garbage: \_\_\_\_\_

6. On the back of this page, draw a sketch of the booth.

I certify that I am familiar with 105 CMR 590.000 Minimum Sanitation Standards for Food Establishments - Chapter X., federal 1999 Food Code and the above described establishment will be operated and maintained in accordance with the regulations

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

-OVER-

Plan Review:

B. Describe floor, wall and ceiling surfaces:

A large sheet of graph paper with a grid pattern. The grid consists of small squares, approximately 1 cm by 1 cm. The paper is oriented horizontally and has a slight tilt. The grid lines are thin and black. The paper is mostly blank, with some faint, illegible markings near the top edge.

**BOARD OF HEALTH COMMENTS:**

PERMIT NUMBER

APPROVED BY:

DATE \_\_\_\_\_

Copy to Applicant: \_\_\_\_\_ In Person \_\_\_\_\_ Mailed

Date \_\_\_\_\_